



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



CONFIRMATION NO. 6970

Bib Data Sheet

|                             |  |              |                        |  |
|-----------------------------|--|--------------|------------------------|--|
| SERIAL NUMBER<br>10/538,693 | FILING OR 371(c)<br>DATE<br>06/10/2005<br>RULE | CLASS<br>426 | GROUP ART UNIT<br>1761 | ATTORNEY<br>DOCKET NO.<br>57A 3727 PCT |
|-----------------------------|--|--------------|------------------------|--|

**APPLICANTS**

Yoshitane Kojima, Izumi-city, JAPAN;  
 Yutaka Yoshikawa, Toyonaka-city, JAPAN;  
 Naemi Kajiwara, Takarazuka-city, JAPAN;  
 Hiroko Anzai, Ashiya-city, JAPAN;  
 Hiroshi Taniguchi, Kobe-city, JAPAN;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/JP03/12742 10/03/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

JAPAN 2002-358036 12/10/2002  
 JAPAN 2003-312400 09/04/2003

**\*\* SMALL ENTITY \*\***

| Foreign Priority claimed        | <input type="checkbox"/> yes <input type="checkbox"/> no  | STATE OR COUNTRY | SHEETS DRAWING | TOTAL CLAIMS | INDEPENDENT CLAIMS |
|---------------------------------|---|------------------|----------------|--------------|--------------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | JAPAN            | 7              | 3            | 1                  |
| Verified and Acknowledged       | Examiner's Signature _____ Initials _____   |                  |                |              |                    |

**ADDRESS**

3713

**TITLE**

Zinc-rich foods having effect of preventing diabetes

|                                   |   |  |
|-----------------------------------|---|--|
| <b>FILING FEE RECEIVED</b><br>630 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees                              |
|                                   |   | <input type="checkbox"/> 1.16 Fees ( Filing )                  |
|                                   |   | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) |
|                                   |   | <input type="checkbox"/> 1.18 Fees ( Issue )                   |
|                                   |   | <input type="checkbox"/> Other _____                           |
|                                   |   | <input type="checkbox"/> Credit                                |